

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

Request for Reinstatement of Class C
Certificate

Julius Cuttino, Jr.

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

DOCKET 2009-107-T
NUMBER: 2006 - 165 - T

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OFF
T.T.W.W.W.

if this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: * Julius Cuttino, Jr.

Telephone:

* 843. 343. 9095

Address:

* 1806 Token St Apt 3
* North Charleston, SC
29405

Fax:

* 843. 723. 1169

Other:

Email: *

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

☐ Application - Class A/A Restricted

☐ Application - Class C Taxi

☐ Application - Class C Charter

☐ Application - Class C Charter Bus

☐ Application - Class C Non-Emergency

☐ Application - Class C Stretcher Van

☐ Application - Class E Household Goods

☐ Application - Class E Hazardous Waste

☐ Application

☐ Request for Extension to Comply with Order

☐ Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded

☐ Request for Cancellation of Certificate

☐ Request for Suspension

☒ Request for Reinstatement

☐ Request for Name Change on Certificate

☐ Request to Amend Scope of Authority

☐ Request to Amend Tariff (rate increase, etc.)

☐ Request to Amend Passenger Limit

☐ Request

☐ Exhibit

☐ Late-Filed Exhibit

☐ Letter

☐ Proposed Order

☐ Publisher's Affidavit

☐ Reservation of Rights

☐ Response

☐ Return to Petition

☐ Other:

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PSC SC
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If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

CLASS C REINSTATEMENT FORM

File the original with:

Public Service Commission of South Carolina
 Clerk's Office
 Motor Carrier Matters
 P.O. Box 11649
 Columbia, S.C. 29211
 (803) 896 - 5100
 FAX (803) 896-5199

Mail or fax a copy to:

S.C. Office of Regulatory Staff
 Transportation Department
 1401 Main Street, Suite 900
 Columbia, S.C. 29201
 (803) 737-0578
 FAX (803) 737-0815

* DATE:

3/9/10

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Please consider this an application for Reinstatement of my:

- ☒ Taxi Certificate Number 7722
☐ Charter Certificate Number _____
☐ Charter Bus Certificate Number _____
☐ Non-Emergency Certificate Number _____

ORS
T,T,W,W/W

My certificate was revoked/cancelled on 5-14-09 because of failure to
 (DATE) pay decal fees.

* I am seeking reinstatement because I would become a registered
taxi owner in the state of South Carolina.

Julius Cottino, Jr.
 (Name of Company)

DBA

N/A
 (if applicable)

* 1806 Token Street Apt C
 (Street Address)

* _____
 (Mailing Address if different from Street Address)

* N Charleston, SC 29405
 (City, State, Zip Code)

* Julius Cottino
 (Signature)

* 843.343.9095
 (Telephone Number)

* Owner
 (Title) Owner, President, etc.